

CLAIMS ONLY						Application Number 10627549	Filing Date				
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	*	*	*
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep
1	I						51				
2		I					52				
3		I					53				
4	I						54				
5		I					55				
6		I					56				
7		I					57				
8		I					58				
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12		I					62				
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43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	4						Total Indep				
Total Depend	14						Total Depend				
Total Claims	18						Total Claims				